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FILING DATE

76661 DAVID A. DAGG, ESQ.

APPLICATION NO

12/24/2008

44 CHAPIN ROAD NEWTON, MA 02459

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| David | A. Daga | (Depositor's name) |
|----------------------|---------------------|--------------------|
| Devi | Ja. Lud | (Signature) |
| MAZCH | 23, 2009 1 | (Date) |
| FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |

2762

10/812,264 03/29/2004 Hasler Haves TITLE OF INVENTION: SYSTEM AND METHOD FOR IMPROVING VIDEO QUALITY USING A CONSTANT BIT RATE DATA STREAM

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATEDIR nonprovisional NO \$1510 \$0 SO \$1510 03/24/2000 EXAMINER ARTUNIT CLASS-SUBCLASS LONSBERRY, HUNTER B 2421 725-090000 Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLFASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Nortel Networks Limited

aurent, Quebec Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 💆 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee

Dublication Fee (No small entity discount permitted) Advance Order - # of Copies 3

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The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14135 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 0 Typed or printed name

Date MARCH 23, 7009

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